Approved for use through 7/31/2008, OMS 0651-0007 U.S. Potent and Tradement Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information unless if displays a valid CMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application of Docket Humber Substitute for Form PTO-876 Effective December 8, 2004 908 APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FLED NUMBER EXTRA RATE (1) BASIC FEE FEE O RATE (\$) NA EEE A (3) CFR 1.16(a), (b), or (c)) . NZA 150.00 NÁ SEARCH FEE 300.00 · N/A (3) CFB 1 16(4) (1) CO (m) N/A NA \$250 N/A EXAMINATION FEE \$500 NA . (3) CFR 1.16(d. ()) or (0) NA \$100 NA TOTAL CLAME \$200 (3) CFR 1.16(7) X\$ 25 minus 20 = ; X\$50 INDEPENDENT CLAIMS OR (37 CFR 1.16(N) X100 X200 If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each (37 OFR 1.18(4)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16()) +180= +360-"If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) OTHER THAN (Calumn 3) OR SMALL ENTITY CLAIMS SMALL ENTITY HIGHES REMAINING NUMBER PRESENT. RATE (1) AFTER ADDI-PREVIOUSLY RATE (\$) **EXTRA** ADOL AMENDMENT TIONAL PAID FOR FEE (\$) W Total Minus FEE (S) ENDM X\$ 25. X\$50 Independent D7 CFR LIGAU OR Minus (a) X100 X200 Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (1) CFR 1.16(1) +180= +360= OR TOTAL TOTAL ADD'L FEE OR ADO'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHES1 REMAINING PRESENT NUMBER RATE (\$) ADO: AFTER. RATE (\$) PREVIOUSLY EXTRA ADDI-MENDMENT TIONAL PAID FOR Œ FEE (1) Total pr cra (.180) Minus. C FEE (T) X\$ 25 X\$50 propendent OR Minus X100 X200 Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MAILTIPLE DEPENDENT CLAIM (37 CFR 1.180) +180= +360æ OR TOTAL. TOTAL OR ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "O' in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number (ound in the appropriate box in column 1.

This collection of Information is required by 67 CFR 1.16. The information is required to obtain by retain a barried by the public which is to file (and by the USPTO to process) an application. Confidentially is poverned by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to lake 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the entry of the you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADORESS. SEND TQ: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.